



Audyogik Tantra Shikshan Sanstha's (A.T.S.S.)

City Pride School - Nigdi

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Ref.: 2404

Date : 08/10/2020

City Pride School
Selection of Executive Member
For Std 1st
Academic year - 2020-2021

Greeting from City Pride School!!!!

This is to inform you all that. Govt of Maharashtra has released a GR dated 04.06.2020 no : -संकीर्ण /११२०/प्र क्र २६२ /एम एम -१ regarding continuation of the Executive Committee of Parent Teacher Association (E-PTA) of the academic year 2019-2020 for the year 2020-2021 due to the pandemic situation of Covid - 19 and the non-working of the school physically.

So, as per the above GR, the E-PTA members of 2019-20 will continue as the E-PTA members for the academic year 2020-2021 for the standards Std 2nd - Std 10th till the school forms the new E-PTA for the academic year 2020-2021.

Hence, we invite the interested parents from Std 1st to self nominate themselves for the E-PTA membership. The interested parents should fill in the attached '**Self Nomination form**' and submit it either in person in the school office or mail it to us on info@cityprideschool.com on or before **Thurs, 13th October 2020 before 3:00 pm.**

If the number of willing parents for Std 1st are more than 1, then a lucky draw will be conducted for selecting the E-PTA member .

Draw will be conducted in the school office on Wednesday, 14th October 2020 at 1:00 pm .

Mrs Maya Sawant -Principal

Mrs. Maya Sawant
Principal

City Pride School, Nigdi, Pune.



CITY PRIDE SCHOOL
EXECUTIVE- PARENT TEACHER ASSOCIATION
SELF NOMINATION MEMBERSHIP FORM
YEAR 2020-2021

I Mr / Mrs _____ am a parent of City Pride School .
My ward is studying in Std _____ Div _____ . I would voluntarily like to fill in the Self
Nomination Membership Form to become a member of the Executive Committee of Parent -
Teacher Association of City Pride School for the academic year 2020-2021.

The school needs only one member per standard. If there are more members nominating
themselves for the same, than the school will conduct a lucky draw and **select only one member**.

In case if I become the E-PTA member, I assure that I will be present for the meetings conducted
by the school.

Date _____ Signature _____

Phone No _____ Mail Id _____

